



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
BREATH ALCOHOL PROGRAM  
**DATAMASTER MAINTENANCE REPORT**

**RECEIVED**

By Carol Day at 8:06 am, Jun 04, 2013

REPORT#6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).  
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.  
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN <b>201302</b>	NAME OF AGENCY <b>St. Joseph Police Department</b>	DATE OF INSPECTION <b>06-03-2013</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>501 Faraon Street St. Joseph, MO 64501</b>		TIME OF INSPECTION <b>1724</b>

**CHECKLIST:** Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) <b>06/03/13 17:24</b>
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <b>48</b> °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <b>Repco Marketing</b> LOT # <b>12001</b> EXRDATE <b>04-02-2014</b>	
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <b>34.0</b> °C SIMULATOR SN <b>SD2278</b> EXP. DATE <b>12-17-2013</b>	
<input checked="" type="checkbox"/> CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE <input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE	

TEST 1 w- <b>.096</b>	TEST 2 a- <b>.097</b>	TEST 3 w <b>.098</b>
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☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS <b>0</b>	(0-.04) <b>1</b>	(.05-.09) <b>3</b>	(.10-.14) <b>3</b>	(.15-.19) <b>1</b>	OVER .19 <b>2</b>
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS  
(USE OTHER SIDE IF NECESSARY).

**INSPECTING OFFICER**

SIGNATURE 	PRINT FULL NAME <b>Sgt. Chris McBane</b>
TYPE 11 PERMIT NUMBER/EXPIRATION DATE <b>220199 08-13-2014</b>	TELEPHONE NUMBER <b>(816) 271-4712</b>

RETURN COMPLETED REPORT TO THE: **Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Blvd.  
Poplar Bluff, MO 63901**

**CERTIFICATE OF ANALYSIS**

**MANUFACTURER AND SUPPLIER:** RepCo Marketing, Inc.

**LOT NUMBER:** 12001

**EXPIRATION DATE:** April 2, 2014 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 12001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1205 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/-3% gms/210L Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is April 3, 2012. The expiration date for this lot number is April 2, 2014 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President  
RepCo Marketing, Inc.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DRTMASTER SERIAL NUMBER 201302  
06/03/13  
17:24

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM (04-07-2009): OKAY  
HEATERS  
SAMPLE CHAMBER: 48C  
FLOW DETECTOR: OKAY  
PUMP  
HIGH SPEED: OKAY  
DETECTOR: OKAY  
FILTERS: OKAY  
QUARTZ STANDARD: OKAY  
CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@AB CDEFG  
HIJKLMNOPQRSTUVWXYZ[\]^\_`abcdefg hijklmno  
pqrstuvwxyz{|}~"

OPERATOR SIGNATURE Sgt. Moe #3240  
Card Stock No. 60021  
REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1465, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DRTMASTER SERIAL NUMBER 201302  
06/03/13

TESTING OFFICER:

MCBANE/C  
OFFICER I.D.: 3740  
PERMIT NUMBER: 220199  
EXPIRATION DATE: 08/13/14  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

TEST	VERIFIED	TIME
BLANK TEST	.000	17:27
INTERNAL STANDARD	.096	17:27
EXTERNAL STANDARD	.097	17:28
BLANK TEST	.000	17:28
INTERNAL STANDARD	.098	17:29
EXTERNAL STANDARD	.000	17:30

N = 3  
SIN. = .1  
RMS. = .097

OPERATOR SIGNATURE Sgt. Moe #3240  
Card Stock No. 60021  
REORDER ALL SUPPLIES FROM N.P.A.S.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 281302  
06/03/13

ARREST TIME: 17:00  
SUBJECT NAME:  
RFI/TEST  
DOB: 01/01/01 SEX: M  
STATE/D.L.: MO/12345  
ARRESTING OFFICER:  
MOBANE/C  
OFFICER I.D.: 3740  
TESTING OFFICER:  
MOBANE/C  
OFFICER I.D.: 3740  
PERMIT NUMBER: 280199  
EXPIRATION DATE: 08/13/14  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	000	17:32
INTERNAL STANDARD	VERIFIED	17:33
RADIO INTERFERENCE		

OPERATOR SIGNATURE *Sgt. M. M. + 33440*  
Card Stock No. 60021  
REORDER ALL SUPPLIES FROM N.P.A.S.

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



CHRISTOPHER MCBANE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER; ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 08/13/2012

Number 220199

Expires 08/13/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)